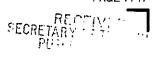
FE5AN018

FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee



14 APR 18 AH 10: 1,2

| 1.  | NAME OF<br>COMMITTEE (in full)                           | TYPE OR PRINT     |                      | Example: If typing                   | g, type  | 12FE4M5           |                                 |  |
|---|--|-------------------|----------------------|--------------------------------------|----------|-------------------|---------------------------------|--|
| , GABRIEL GOMEZ FOR SENATE  |  |                   |                      |                                      |          |                   |                                 |  |
|   |  |                   |                      |                                      |          |                   |                                 |  |
|   |  |                   |                      |                                      |          |                   |                                 |  |
| ADI   | DRESS (number and street)                                | C/O RED CURVE     | SOLUTIONS            | 1 1 1 1 1                            | <u> </u> |                   |                                 |  |
| *▼  | ,  | 138 CONANT STE    | REET                 | 1 ) 1 1 1                            |          |                   |                                 |  |
| Ĺ-  | Check if different<br>than previously<br>reported. (ACC) | BEVERLY           |                      |                                      |          | MA 0191           | 5                               |  |
| 2. FEC IDENTIFICATION NUMBER ▼  |  | JMBER ▼           | CITY                 |                                      | STATE A  |                   | ZIP CODE                        |  |
|   | C 00541540   |                   | 3. IS THIS<br>REPORT | NEW (N)                              | OR       | AMENDED (A)       | STATE ▼ DISTRICT                |  |
| 4. TYPE OF REPORT (Choose One)  |  |                   |                      |                                      |          |                   |                                 |  |
|   | (a) Quarterly Reports:                                   | · (t              | b) 12-Day PF         | IE-Election Repo                     |          | <b>=</b> 1        |                                 |  |
|   | April 15 Quarterly F                                     | Report (Q1)       |                      | Primary (12P)                        |          | General (12G)     | Runoff (12R)                    |  |
|   | (a)  | , , , ,           |                      | Convention (1                        | 12C)     | Special (12S)     |                                 |  |
|   | July 15 Quarterly R                                      | oort (Q2)         |                      | MVM7/                                | ١١٥٠٥١   | ▎▗▝▗▄ <u>▄</u> ▄▄ | in the                          |  |
|   | October 15 Quarter                                       | ly Report (Q3)    | Election o           | n Lal                                | العطا    |                   | State of                        |  |
|   | January 31 Year-En                                       | i Report (YE) (c) | 30-Day <b>PC</b>     | 30-Day POST-Election Report for the: |          |                   |                                 |  |
|   |  | ·                 |                      | General (30G)                        | ) [      | Runoff (30R)      | Special (30S)                   |  |
|   | Termination Report                                       | (TER)             | Election o           | 11 11                                |          |                   | in the State of                 |  |
| 5. Covering Period 01 2014 through 03 2014  I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. |  |                   |                      |                                      |          |                   |                                 |  |
| Type or Print Name of Treasurer BRADLEY T CRATE   |  |                   |                      |                                      |          |                   |                                 |  |
| Signature of Treasurer  BRADLEYT CRATE  Date    M M     D D   |  |                   |                      |                                      |          |                   |                                 |  |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.                      |  |                   |                      |                                      |          |                   |                                 |  |
|   | Office<br>Use<br>Only                                    |                   |                      |                                      |          | I I               | FEC FORM 3<br>(Revised 02/2003) |  |